

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)				TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.					COURT USE ONLY DUE DATE:						
1a. CONTACT PERSON FOR THIS ORDER Tom Belles				2a. CONTACT PHONE NUMBER (202) 424-7652			3. CONTACT EMAIL ADDRESS tom@rockcreekdc.com								
1b. ATTORNEY NAME (if different)				2b. ATTORNEY PHONE NUMBER			3. ATTORNEY EMAIL ADDRESS								
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Rock Creek Partners LLC 1010 Wisconsin Ave, NW Suite 215 Washington, DC 20007				5. CASE NAME Whalen et al v. Albertsons					6. CASE NUMBER 3:23-cv-00459						
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) → <input checked="" type="checkbox"/> FTR				8. THIS TRANSCRIPT ORDER IS FOR: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> APPEAL <input type="checkbox"/> NON-APPEAL </div> <div> <input type="checkbox"/> CRIMINAL <input checked="" type="checkbox"/> CIVIL </div> <div> <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) CJA: Do not use this form; use Form CJA24. </div> </div>											
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)					c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION <small>If requesting less than full hearing, specify portion (e.g. witness or time)</small>	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
07/27/2023	VC			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 11. SIGNATURE													12. DATE 08/01/2023		

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